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THIRD ANNUAL REPORT

Of The

MENTAL DISABILITIES BOARD OF VISITORS

For

Fiscal Year 1978

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STATE OF MONTANA
Office of the Governor
Mental Disabilities Board of Visitors

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Thomas L. Judge
Governor

This is the third annual report of the Mental Disabilities Board of Visitors to the Honorable Governor of the State of Montana. This report is issued in accordance with Sections 38-1330 (9) R.C.M. (1947, as amended 1977) and 38-1232 (7) R.C.M. (1947, as amended 1975).

The Mental Disabilities Board of Visitors, established by the legislature in 1975, is charged by Montana Law with reviewing patient care at Montana's institutions for the mentally ill, and the developmentally disabled and also community mental health centers. During the past fiscal year the Board of Visitors has made site visits of those institutions and community mental health centers which serve the emotionally ill and the developmentally disabled.

This annual report to the Governor of the State of Montana serves to highlight the major accomplishments and deficiencies of those facilities coming under the purview of the Board of Visitors. The reports issued by the Board of Visitors during the past year indicate that positive steps have been taken towards better care of Montana's mentally ill and developmentally disabled. There are, however, a number of deficiencies which prevent persons from receiving adequate care and treatment. The Board of Visitors is hopeful that these findings will continue to strengthen the delivery of treatment services to Montana citizens.

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The intent of R.C.M. 1947, Chapter 12 and 13, is to insure that mentally ill and developmentally disabled persons receive appropriate treatment. The mechanism by which the law hopes to insure this is to require visible evidence (i.e. documentation) of what has occurred in the course of admission, treatment and discharge. Listed below are the highlights of the various facilities coming under the purview of the Board of Visitors.

ADMINISTRATIVE-STAFF

Accomplishments:

Reorganization efforts at Boulder River School and Hospital have created better linkage and communication with the various departments of grounds. These efforts have created a more unified treatment program for the residents.

The outreach program to the families of clients served by Eastmont Training Center provides an excellent means of communication, contact and continuity of care.

The addition of two Board certified psychiatrists at Warm Springs State Hospital and the addition of a psychiatrist to the Great Falls Mental Health Center in September of 1977 continues to promote better care and treatment to the mentally ill. In addition the satellite offices within Region II are afforded the services of a psychiatrist.

The Center for the Aged in Lewistown has added a recreational therapy department. This department is providing most of the therapeutic programming to the residents at this Center.

Regions II, III, IV maintain closer communication with Warm Springs State Hospital. It is hoped with the reorganization at the State Hospital that this relationship will continue to develop.

Consumer satisfaction data available to the Board from the various mental health regions indicates most persons surveyed were satisfied with the treatment they received and felt somewhat better about their problems.

A Community Support Project, with the assistance of the Billings Mental Health Center, the Department of Institutions, and Warm Springs State Hospital has been initiated through federal funds. The Board supports the efforts of this project in creating a much needed linkage with the institution and the communities.

The Board of Visitors wishes to acknowledge that two of the Regional Mental Health Centers have received commendations during the past year:

1. In the fall of 1977, the Eastern Montana Mental Health Center was recognized by the National Institute on Mental Health (NIMH) as one of the top three rural mental health centers.

2. On March 17, 1978, Region III received accreditation from the Joint Commission on the Accreditation of Hospitals (JCAH). It is our hope that other Centers will also seek accreditation.

Deficiencies:

In general it was observed among the five mental health center regions that the more advanced a staff person's degree and level of training, the more administrative duties they perform, and therefore the less clinical time spent with patients. The time spent in direct patient services varied from 27% to 30%, with 42% to 48% of the time being spent in administration. (The one exception to these statistics was the Billings Mental Health Center whose direct patient time for the last fiscal year was greater than 50%). The Board feels that such allocation of staff time would strongly indicate the need for re-evaluation of program priorities as they relate to direct patient services. These statistics indicate this concern when waiting lists at the various mental health centers vary from one to three weeks. Such lists certainly indicate that people in the community are in need of and desire the services of the mental health centers.

Fee schedules in the mental health centers of Great Falls and Billings appear to be excessive. Such costs increase the cost of mental health services to all persons; whether through third party payment or fees set on ability to pay. Reimbursable services in Billings are being signed off by a practitioner who did not participate or directly supervise the services given. The Board questions these policies and feels a review by the Montana Physicians Service and/or a professional peer review may be able to respond to these concerns.

The Board of Visitors shares the concern of the Regional Directors regarding the lack of psychiatrists available throughout the State. There are presently vacancies in Glendive (Region I), Lewistown (Region III), and Butte (Region IV). There was over a seven month vacancy in Flathead County (Region V). This position was filled in July, 1978.

For any long range planning to occur within the community mental health center regions, there appears to be a need for more fiscal certainty. This fact was noted by all of the Centers the Board visited.

The staffing patterns within the Forensic unit at Warm Springs State Hospital are minimal, thereby restricting

recreation and physical activity. The Boulton building, prior to reorganization was staffed by one aide per ward. This is grossly inadequate for treatment to occur. Under the reorganization of Warm Springs a new pattern for staffing has been established. It is the hope of the Board of Visitors that all the units will be staffed properly, so that optimal therapeutic activities may be provided to all residents of the State Hospital. Additional concern regarding staff was raised at the Lewistown Mental Health Center, where up until June, 1978, one registered nurse served the mental health needs of three counties.

In April, 1978, the Board of Visitors supported the continuation of the Intensive Treatment Unit at Warm Springs State Hospital. With the reorganization it does not appear that this unit is operating to the extent it was under the regional system.

PHYSICAL PLANT [38-1232 (3); 38-1330 (4) R.C.M., 1947]

Accomplishments:

Improvements at Warm Springs State Hospital include the interior painting and roof repair to the Forensic unit and the demolition of the Musigbrod and Mitchell buildings, which were inadequate for residential treatment.

Concerns regarding the physical plant were noted in the August, 1977, Board of Visitors report on Boulder River School and Hospital. Improvements were found in the following areas: protective, unbreakable screening has been placed over electrical fixtures; the interiors of cottages ten through fifteen have been repainted. Other projects in process include: the demolition of cottages one, two and four; the laundry remodeling project, and Phase II of the hospital remodeling project.

Many improvements in the physical plant were made at the Center for the Aged in Lewistown. These include: the Food Service remodeling project, the addition of a canteen for the residents, remodeling in the "A" wing of the women's ward and the east wing of the men's ward.

Classrooms at Eastmont Training Center have been moved from the basement to the first floor, thereby correcting the fire hazard noted in the Board's last report of this facility.

Deficiencies:

The transitional care facilities at Miles City (Region I) and Helena (Region IV) are not accessible to the physically handicapped.

The Children's Unit at Warm Springs State Hospital and Group Home in Billings (Region III) do not offer adequate privacy to the residents of the facilities.

The physical conditions of the Boulton building at Warm Springs State Hospital are inadequate as a therapeutic milieu. Remodeling is needed throughout this building. The tragic feature of Boulton (formerly Region IV) which now houses the long-term patients, is that it has a higher population under the reorganization system.

ADMISSIONS-PLACEMENT [38-1209 (2,5) and 38-1222 (2) R.C.M., 1947]

During the past six months the Board of Visitors has reported to the administration of Boulder River School and Hospital, and to the Department of Institutions on over fifty residents who either have no court order or whose court orders have expired.

In addition there are at least twelve residents at Boulder River School and Hospital who can function at a level consistent with the standards set for community placement. These persons have not been placed because of a lack of vacancies within the community. This factor further hinders the placement of the developmentally disabled patients at Warm Springs and Galen to Boulder River, where better treatment services can be provided.

RECORD KEEPING [38-1222, 1223, 1324 and 1328 R.C.M., 1947]

Accomplishments:

Clinical Records Clerks have been hired at the Billings and Great Falls Mental Health Centers and Warm Springs State Hospital. Their job is to review charts, determine deficiencies and notify the various persons responsible. Such mechanisms certainly improve the quality of records and the services delivered. Through the efforts of the records clerk at Warm Springs State Hospital, over one thousand deficient files have been corrected in the last sixteen months.

Medication histories (Section 38-1328 (2) R.C.M., 1947) were documented at least partially in the records reviewed at the Great Falls Mental Health Center. Recent records of the Missoula Mental Health Center contained better documentation of medication prescribed, than past records. The other centers were not in full compliance with this section of the legislation.

The Mental Health Centers of Billings and Great Falls have devoted considerable time and energy to the development of a comprehensive, efficient record keeping system. The Center for the Aged also has improved their record keeping system during the past year.

Deficiencies:

There are no current evaluations of an individual's

psychological status at the Center for the Aged. (Section 38-1324 (5) R.C.M., 1947).

Referral information on patients sent from Warm Springs to Boulder River School, the Center for the Aged and the community mental health centers is minimal. All of these facilities indicated that further information would offer better continuity in terms of further treatment.

Discharge summaries for persons released from Warm Springs State Hospital (38-1326 R.C.M., 1947) are prepared as often as two to four weeks after the person has left Warm Springs.

Medical histories and medication records were very sketchy or non existant at the Helena and Lewistown Mental Health Centers, Warm Springs State Hospital and Boulder River School and Hospital. This information is vital when trying to correlate a change in patient status with changes in his or her drug regimen.

Dates of interviews with a client were noted on the "Contact Sheet" of the Missoula and Helena Mental Health Centers, yet there was often no progress notes written. (Section 38-1328 (10) R.C.M., 1947).

At the Missoula, Helena, and Lewistown mental health centers there was documentation of prescriptions for medication, however there was no evidence that the psychiatrist had direct contact with the patient.

The record keeping system in the cottages at Boulder River School and Hospital is fragmented and disorganized. It is difficult to "track" a resident when from four to six different file folders are kept on an individual. As a result of this disorganization, much of the information is not effectively transmitted to the Habilitation Aids I and II's.

Many of Boulder River School and Hospital's individual habilitation plans (IHP) reviewed by the Board of Visitors and its consultants were one to two years old and there were no current updates in the files. The Board's report of June 12-13, 1978, provides further inforamtion regarding this deficiency.

TREATMENT PLANS [38-1232 (4) and 38-1324 R.C.M., 1947]

Accomplishments:

The diagnostic and evaluation screenings done by Region V, under the 314 D Grant (Federal revenue sharing grant) are the only such services offered by a mental health center region in the State. The intent of the grant is to offer evaluation and alternative treatment to institutionalization.

Individual habilitation plans (IHP) exist for each resident of Eastmont Training Center. Specific goals and objectives were clearly stated. In addition, academic, therapeutic, and recreational programs were integrated into the IHP.

The aversive treatment programs of the Intensive Treatment Units of Boulder River School and Hospital (Sections 38-1227 R.C.M., 1947) are providing the best documentation of treatment programming with regard to base-line data, treatment and revisions.

Deficiencies:

Files reviewed at Billings, Helena, Missoula and Miles City Mental Health Centers, and the Center for the Aged indicate that treatment plans were in some cases incomplete or there was, in fact, no formalized treatment plan for the clients served in these facilities (38-1328 (6) R.C.M., 1947).

With the exception of the thirty day evaluation and emergency admissions, the individual habilitation planning team has not met at Boulder River School and Hospital since May, 1978. The administration stated that in addition to the fact that the development of an IHP is complex and time-consuming, the shorage of clerical staff has created further problems.

In some cottages at Boulder River School and Hospital, the IHP document is not being used. The staff in these cottages are designing their own informal IHP, without input from the interdisciplinary team.

Section 38-1222 (6) R.C.M., 1947, states that one person should be responsible to see that all parties to the IHP are doing what has been planned for a resident. There was no evidence at Boulder River School and Hospital that this coordination exists for a resident's treatment.

As stated previously this annual report serves to highlight the detailed reports submitted to the Governor, the respective directors or superintendents of the facilities reviewed and the Director of the Department of Insititutions. If persons reviewing this annual report want additional information, please refer to the individual reports which are on file at the Governor's Office.

APPENDIX A

SCHEDULE OF SITE VISITS

for

FISCAL YEAR 1978

MENTAL DISABILITIES BOARD OF VISITORS

June 1, 1977 - June 30, 1978

DATE	LOCATION	BOARD MEMBERS PRESENT	CONSULTANTS
8/24/77	Boulder	Boedecker, Bertelsen, Rummel	None
8/25/77	Warm Springs	Boedecker, Bertelsen, Rummel	None
9/28/77	Glendive	Boedecker, Bertelsen, Rummel, Stimpfling	None
9/29/77	Miles City M.H.C.	Boedecker, Bertelsen, Rummel, Stimpfling	None
10/21/77	Helena	Boedecker, Bertelsen, Kenyon, Rummel Stimpfling	Meeting with Judy Carlson, L. Zanto, B. Lohn, J. Fitzpatrick
11/17/77	Helena M.H.C.	Boedecker, Bertelsen, Kenyon, Rummel Stimpfling	Dr. W. Docktor Dr. R. Swenson
11/18/77	Butte M.H.C. Galen State Hospital	Boedecker, Bertelson, Kenyon, Rummel	None
12/6-12/7/78	Missoula M.H.C.	Boedecker, Bertelsen, Kenyon, Rummel Stimpfling	Dr. G. Cochrane Dr. R. Swenson
2/16-2/17/78	Billings M.H.C.	Boedecker, Bertelsen, Stimpfling	Dr. F. Seitz
3/9-3/10/78	Great Falls M.H.C.	Boedecker, Bertelsen, Kenyon Stimpfling	Dr. W. Docktor Dr. R. Swenson
4/26-4/28/78	Warm Springs	Boedecker, Bertelsen, Kenyon, Rummel Stimpfling	Dr. W. Docktor, Dr. F. Seitz, Dr. J. Wollerscheim
5/18-5/19/78	Lewistown (Annual Meeting, Center for Aged & MHC)	Boedecker, Bertelsen, Kenyon, Seitz	Dr. W. Docktor Dianne Tassie, R.N.
6/12-6/13/78	Boulder	Boedecker, Bertelsen, Kenyon, Rummel Seitz	Dr. W. Docktor, Dr. C. Horejsi Larry Holmquist, M.S.